

EXHIBIT 2

1 UNITED STATES DISTRICT COURT
2 FOR THE NORTHERN DISTRICT OF OHIO
3 EASTERN DIVISION

4 IN RE: NATIONAL)
5 PRESCRIPTION) MDL No. 2804
6 OPIATE LITIGATION)
7 _____) Case No.
8) 1:17-MD-2804
9)
10 THIS DOCUMENT RELATES) Hon. Dan A.
11 TO ALL CASES) Polster
12)

13 WEDNESDAY, APRIL 24, 2019

14 HIGHLY CONFIDENTIAL - SUBJECT TO FURTHER
15 CONFIDENTIALITY REVIEW

16 - - -

17 Videotaped deposition of Anna
18 Lembke, M.D., held at the offices of Lief
19 Cabraser Heimann & Bernstein, LLP, 275
20 Battery Street, 29th floor, San Francisco,
21 California, commencing at 8:07 a.m., on the
22 above date, before Carrie A. Campbell,
23 Registered Diplomat Reporter and Certified
24 Realtime Reporter.

25 - - -

26 GOLKOW LITIGATION SERVICES
27 877.370.3377 ph | 917.591.5672 fax
28 deps@golkow.com

1 How does that -- how does the
2 Gateway Effect play out in your mind from
3 prescription to going out into a street
4 dealer?

5 MR. ARBITBLIT: Object to form.
6 Vague. Compound.

7 THE WITNESS: An individual
8 presents in a medical clinic with pain
9 and is prescribed opioids by that
10 doctor.

11 The doctor has been misled by
12 false promotional statements on the
13 part of defendants to believe that
14 there are benefits to the use of
15 opioids used long term in the
16 treatment of pain, despite the absence
17 of evidence for that. And that doctor
18 has also been told that the risks are
19 very small for addiction as long as
20 that individual is being prescribed
21 opioids for a pain condition.

22 So that well-intentioned and
23 compassionate doctor, who is trying to
24 do the right thing, will continue that
25 opioid prescription and even increase

1 MR. ARBITBLIT: Object to form.

2 THE WITNESS: I would agree
3 that such a doctor is violating
4 medical ethics, but I have also
5 written and published on the problem
6 of prescribing, and we have shown,
7 using Medicare Part D data, that the
8 increase in opioid prescribing in this
9 country over the past three decades
10 was not primarily due to a small
11 subset of prolific prescribers or
12 so-called pill mill doctors, unethical
13 doctors, doctors who have lost their
14 moral compass. Those types of doctors
15 have always existed and will always
16 exist.

17 In fact, the increase in opioid
18 prescribing in this country has been
19 primarily driven by all types of
20 doctors across all types of
21 specialties because of the major
22 paradigm shift in the use of opioids
23 for minor and chronic pain conditions
24 as a result of misrepresentation of
25 the evidence on the part of the

1 defendants.

2 QUESTIONS BY MR. TSAI:

3 Q. If a doctor in the counties was
4 prescribing opioid medications purely for
5 their personal profit, knowing that the
6 individual they're providing opioids to did
7 not have a legitimate pain condition, would
8 you agree that doctor is committing a crime?

9 MR. ARBITBLIT: Object to form.

10 THE WITNESS: I would agree
11 that that doctor is committing a
12 crime, but I think doctors like that
13 constitute a small subset of the
14 overall opioid prescriptions.

15 QUESTIONS BY MR. TSAI:

16 Q. Okay. Do you have a method of
17 assigning the degree to which doctors in
18 Cuyahoga and Summit Counties, in your words,
19 bear some responsibility for the
20 overprescribing of opioids for chronic pain
21 versus the contribution of any of the other
22 factors we've discussed today?

23 MR. ARBITBLIT: Object to form.

24 THE WITNESS: I believe that
25 the majority of opioid prescribers in

1 Henry Schein, do you know if they're a
2 defendant in this case?

3 A. I don't recall.

4 Q. Miami-Luken?

5 A. I don't recall.

6 Q. Anda?

7 A. I don't recall.

8 Q. Earlier today you said that you
9 acknowledged the distributors' contribution
10 to the opioid epidemic; is that right?

11 A. Yes.

12 Q. Okay. Are you prepared to
13 offer an opinion in this litigation
14 concerning the contribution of any
15 distributor to the opioid epidemic?

16 A. It's my opinion -- it's my
17 understanding that other expert witnesses
18 will be offering testimony on distributors.
19 I've not been asked to offer testimony on
20 that.

21 Q. Okay. And so when you
22 referenced the pharmaceutical opioid industry
23 in your report, are distributor defendants
24 included in that insofar as -- strike all
25 that.

1 You mentioned the
2 pharmaceutical opioid industry in your
3 report, and you told Mr. Lavelle that as you
4 define that term, it includes manufacturers,
5 distributors and pharmacies; is that right?

6 A. That's right.

7 Q. When you reference misleading
8 or false marketing material and attribute it
9 to the pharmaceutical opioid industry in your
10 report, are you referring to the distributors
11 that have been named as defendants in this
12 case?

13 A. No.

14 Q. And in preparing your report,
15 did you consider any documents that were
16 produced by a distributor that is named as a
17 defendant in this case?

18 A. No.

19 Q. Do you have any training or
20 expertise in supply chain management?

21 A. No.

22 Q. Do you have any training or
23 expertise in the distribution of controlled
24 substances?

25 A. No.